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APPLICANTS

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Noted ** CONTINUING DATA *****

Noted ** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY ID	SHEETS DRAWING 3	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 8
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>					

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TITLE
 Assisted memory device

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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